

Visitor Authorization Letter

Date: _____

To Whom It May Concern,

I, [Your Name], the authorized representative of [Resident's Name], residing at [Community Name and Address], hereby grant permission for the following individual(s) to visit the resident:

- Name: _____
- Relationship: _____
- Contact Number: _____

This authorization is valid from [Start Date] to [End Date]. During this time, the mentioned individual(s) are permitted to visit the resident at any time authorized by the retirement community.

Thank you for your cooperation.

Sincerely,

[Your Signature]

[Your Name]

[Your Address]

[Your Phone Number]

[Your Email]